

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	N P		3-28-01
O.I.P.E. CLASSIFIER	DN	32	4/15
FORMALITY REVIEW	Sept	1000	05/08/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)..... Canceled                      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
Final	
Original	
1	01/13/02
2	01/13/02
3	01/13/02
4	01/13/02
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49	01/13/02
50	01/13/02

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here